



407121

31-3E-31J

WATER WELL REPORT

Notice of Intent Number W217169

Property Owner Last Name _____ First Name _____

Organization Name Camano shores COMM club INC

Well Tag ID Number (e.g., AAA-001) BBA 242 Variance Granted? (Circle One) Yes No

Water Right Permit Required? (Circle One) Yes or No If Yes, enter Water Right Permit Here (Required) G1-226-70P

Well Use (Circle All That Apply):

Agricultural Irrigation _____ Commercial Group Domestic

Domestic _____ Individual Irrigation _____ Municipal _____

Parks and recreation _____ Stockwater _____

Test Well _____ Other _____

Type of Work (Circle One):

Alteration _____ Deepened Well New

Hydrofracturing _____ Replacement _____

Other _____

Method (Circle One):

Cable _____ Driven _____

Dug _____ Hydrofracturing _____

Jetted _____ Rotary _____

Other _____

Drilling Start Date 2-14-11Drilling Completion Date 3-2-11

Well Location Only (No Mailing Address, No PO Box, Cross Streets are ok)

Well Street Address 370 E. Wagner RdWell City Camano IslandWell County IslandWell Zip Code 98282Tax Parcel Number NON-PROFIT-Tax Exempt

If claiming tax parcel exemption (Circle One) Tribal Federal Property Right of Way Railroad Land

NW	NE	NW	NE
SW	SE	SW	SE
NW	NE	NW	<u>X</u>
SW	SE	SW	SE

Place an "X" in $\frac{1}{4}$ Township 31 N Range 3E Circle One East or West Section 31

Latitude _____ Decimal Degrees; Longitude _____ West Decimal Degrees

CONSTRUCTION INFORMATION - SECURELY ATTACH (STAPLE) ADDITIONAL SHEETS OF INFORMATION (NO DRAWINGS) AS NEEDED.

Diameter of Well _____ ft 6 in, Drilled 254 ft _____ in Depth of Completed Well 254 ft _____ in

Casings (At least one Casing must have 6 in of stickup and all fields must be filled out for each casing entered)

Type (Circle One) Concrete Plastic Steel Other _____ Diameter 6 inches Stickup 24 inches Depth 2 ft _____ in, TO 246 ft _____ in

Type (Circle One) Concrete Plastic Steel Other _____ Diameter _____ inches Stickup _____ inches Depth _____ ft _____ in, TO _____ ft _____ in

Liners? Circle One Yes No (If yes, then complete the below fields that apply)

Type 1 (Circle One) PVC Steel Other _____ Diameter _____ in, From _____ ft _____ in TO _____ ft _____ in

Type 2 (Circle One) PVC Steel Other _____ Diameter _____ in, From _____ ft _____ in TO _____ ft _____ in

Perforations? Circle One Yes No (If yes, then complete the below fields that apply)

Type of Perforator (Circle One) Drill Mills Knife Saw cut Star Torch Cut Other _____ Perforation size _____ in by _____ in Total Perforations _____

Perforation 1 from _____ ft _____ in, TO _____ ft _____ inches Perforation 2 from _____ ft _____ in, TO _____ ft _____ inches

Screens? (Circle One) Yes No (If yes, then complete the below fields that apply)

Mfr 1 Alloy Type 5. Steel Diam 5 in Slot Size 15 From 244 ft _____ in TO 254 ft _____ in

Mfr 2 _____ Type _____ Diam _____ in Slot Size _____ From _____ ft _____ in TO _____ ft _____ in

Sand/Gravel Packing? (Circle One) Yes ☒ No (If yes, then complete the below fields that apply)

Packing Material 1 Circle One 10-20 20-40 8-12 Coarse Sand Pea Gravel From _____ ft _____ in TO _____ ft _____ in
 Packing Material 2 Circle One 10-20 20-40 8-12 Coarse Sand Pea Gravel From _____ ft _____ in TO _____ ft _____ in

Surface Seal Was there an existing surface seal? Yes or ☒ No Depth of Seal 18 ft _____ in
 Type of Seal Material (Circle One) ☒ Bentonite Bentonite Slurry Concrete Dry Bentonite Neat Cement Neat Cement Grout

Pump Pump Installed? (Circle One) ☒ Yes ☐ No If yes, Mfr Name ELINT-Walling Pump Type SUB HP 5

Static Water Level (Circle One and fill in the blanks if needed)

Yes Measured Level (Below top of well) 160 ft 2 in Date Measured 3-8-11

Flowing Artesian (Circle One) Greater Than or Equal To _____ GPM _____ PSI Artesian Water Controlled by (e.g. Cap, Valve, etc.) _____

Dry Hole

Unusable Water Strata? (Circle One) Yes ☒ No If Yes is circled, method of sealing strata off _____

Strata 1 (Specify Unusable Water Type) _____ From _____ ft _____ in TO _____ ft _____ in

Strata 2 (Specify Unusable Water Type) _____ From _____ ft _____ in TO _____ ft _____ in

General Well Tests (Circle all that apply and fill in the blanks)

Bailer Test Date of test _____ (Circle One) Greater Than or Equal To _____ GPM, with _____ Drawdown after _____ hrs _____ min

Air Test Date of test _____ (Circle One) Greater Than or Equal To _____ GPM, with stem set at _____ ft _____ in

Test Duration _____ hrs _____ min

Pump Test Date of test 3-8-11 Test performed by GENE'S

Note: Drawdown=the amount the water level is lowered below the static level

Yield 60 gpm, with 5 ft 7 1/2 in; Drawdown after 4 hrs _____ min Yield _____ gpm, with _____ ft _____ in; Drawdown after _____ hrs _____ min

Yield _____ gpm, with _____ ft _____ in; Drawdown after _____ hrs _____ min Yield _____ gpm, with _____ ft _____ in; Drawdown after _____ hrs _____ min

Yield _____ gpm, with _____ ft _____ in; Drawdown after _____ hrs _____ min Yield _____ gpm, with _____ ft _____ in; Drawdown after _____ hrs _____ min

Note: Recovery=The time taken at zero when the pump is turned off. Water level is measured from the well top to _____. Ask Lars for wording

Time _____ hrs _____ min; Water Level _____ ft _____ in Time _____ hrs _____ min; Water Level _____ ft _____ in Time _____ hrs _____ min; Water Level _____ ft _____ in

Time _____ hrs _____ min; Water Level _____ ft _____ in Time _____ hrs _____ min; Water Level _____ ft _____ in Time _____ hrs _____ min; Water Level _____ ft _____ in

Time _____ hrs _____ min; Water Level _____ ft _____ in Time _____ hrs _____ min; Water Level _____ ft _____ in Time _____ hrs _____ min; Water Level _____ ft _____ in

Well Lithology Details - Your lithology MUST be reported to the drilled depth of the well. Please check your "From" and "To" feet and inches for accuracy.

Layer Formation Description	From	To	Layer Formation Description	From	To
Top soil	0	3			
Glacial Till	3	24			
Dry sand	24	58			
Dry sand-Gravel	58	157			
Blue clay	157	218			
sandy-clay	218	232			
water-sand-gravel	232	254			
			Well sitting per		
			Island Co. code		
			8.09.07 C-D & E		

Comments - Enter any other important well construction and/or location details here.

CERTIFICATION - I hereby certify that I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington Well construction standards. Materials used and the information reported within the Well Report are true to my best knowledge and belief.

(Circle One) ☒ Driller ☐ Trainee Engineer Name(Print) Gene Hitt

Driller/Engineer/Trainee Signature Gene Hitt

Driller/Trainee/PE License No. _____

Drilling Company GENE'S Well Drilling

Address 5115 268th St. N.W

City, State, Zip Stanwood, Wa, 98292

Phone Number 360 629 2223

Email Address _____

If TRAINEE, Mentor Driller License No. _____

Mentor Driller Signature _____

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

377845

STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

CERTIFICATE OF WATER RIGHT

FILED 499
VOL 92
PAGE 92
JAN 2 10 12 AM '81
REQUEST OF
H. J. Ward, Esq., Ecology
AUDITOR
ISLAND COUNTY, WASH.
DEPUTY

- ☐ Surface Water (Issued in accordance with the provisions of Chapter 117, Laws of Washington for 1917, and amendments thereto, and the rules and regulations of the Department of Ecology.)
- ☒ Ground Water (Issued in accordance with the provisions of Chapter 263, Laws of Washington for 1945, and amendments thereto, and the rules and regulations of the Department of Ecology.)

PRIORITY DATE	APPLICATION NUMBER	PERMIT NUMBER	CERTIFICATE NUMBER
May 3, 1976	GI-22670	GI-22670P	GI-22670C

NAME	ADDRESS (STREET)	CITY	(STATE)	(ZIP CODE)
CAMANO SHORES COMMUNITY CLUB INC.	18127 - 42nd Place West	Lynnwood	Washington	98036

This is to certify that the herein named applicant has made proof to the satisfaction of the Department of Ecology of a right to the use of the public waters of the State of Washington as herein defined, and under and specifically subject to the provisions contained in the Permit issued by the Department of Ecology, and that said right to the use of said waters has been perfected in accordance with the laws of the State of Washington, and is hereby confirmed by the Department of Ecology and entered of record as shown.

PUBLIC WATER TO BE APPROPRIATED

SOURCE
Well
TRIBUTARY OF (IF SURFACE WATERS)

MAXIMUM CUBIC FEET PER SECOND	MAXIMUM GALLONS PER MINUTE	MAXIMUM ACRE-Feet PER YEAR
	55.0	66.0

INTENT, TYPE OF USE, PERIOD OF USE
Community domestic supply - continuously (74 residences)

LOCATION OF DIVERSION/WITHDRAWAL

APPROXIMATE LOCATION OF DIVERSION-WITHDRAWAL
200 feet west and 450 feet south from E $\frac{1}{2}$ corner of Sec. 31

LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION)	SECTION	TOWNSHIP N.	RANGE, (E. OR W.) W.M.	W.R.I.A.	COUNTY
Govt Lot 5	31	31	3 E	6	Island

RECORDED PLATTED PROPERTY

BLOCK	OF (GIVE NAME OF PLAT OR ADDITION)
32	Camano Shores Division #1

LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

Plat of Camano Shores Division #1 as recorded in Vol. 9, page 61 of Plats in Island County.